

#### PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of:

Attorney Docket No.: 32414.24.1

John Francis Dufort

Application No.:

09/806,962

Examiner: Michael D. Masinick

Filed:

October 19, 2001

Group Art Unit: 2125

For:

LITHOPHANE-LIKE ARTICLE AND METHOD OF MANUFACTURE

### **RESPONSE**

RECEIVED

Mail Stop AF Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

MAY 2 1 2004

Technology Center 2100

Sir:

The following correspondence is in response to the Office Action of March 15,

2004.

Customer No. 22859 Fredrikson & Byron, P.A. 4000 Pillsbury Center 200 South Sixth Street

Minneapolis, MN 55402-1425 USA

Telephone: (612) 492-7000 Facsimile: (612) 492-7077

Attorney Docket No. 32414.24.1

AMENDMENT TRANSMITTAL

In re the application of:

John Francis Dufort

Application No.:

09/806,962

Examiner: Michael D. Masinick

Filed:

October 19, 2001

Group Art Unit: 2125

For:

LITHOPHANE-LIKE ARTICLE AND METHOD OF MANUFACTURE

Mail Stop AF Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450 RECEIVED

MAY 2 1 2004

Sir:

Technology Center 2100

Transmitted herewith is an Amendment in the above-identified application.

Applicant(s) is/are entitled to small entity status in accordance with 37 CFR 1.27. [X]

The filing fee has been calculated as shown below:

Claims Remaining After Amendment  Cotal * Indep.  * Mult. Dep.	Highest No. Previously Paid For - 20** - 3***	Present Extra (Equals) = 0 = 0	Small Entity Rate x 9 x 43 + 145 TOTAL	Add'l Fee \$ \$ \$	OR OR	Large Entity Rate x 18 x 86 + 290 TOTAL	Add'l Fee S S S S S S S S S S S S S S S S S S
--	--	--------------------------------	--	--------------------------------	-------	---	---

# [ ] First Presentation of Multiple Dependent Claim [MDC]

If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

[X] The Commissioner is hereby authorized to charge payment of any fees under 37 C.F.R. § 1.16 for presentation of extra claims or credit any overpayment to Deposit Account No. 06-1910.

Allen W. Groenke
Registration No. 42,608

Please grant any extension of time necessary for entry; charge any fee due to Deposit Account No. 06-1910.

#### CERTIFICATE OF MAILING

I hereby certify that this document is being of	deposited with the United States Postal Service with sufficient postage as first class
mail in an envelope addressed to: Commission	oner for Patents, PO Box 1450, Alexandria, VA 22313-1450 on
May 17, 2004	oner for Patents, PO Box 1450, Alexandria, VA 22313-1450 on

Allen W. Groenke

Date of Deposit #2856893\2